

**FORM LM-30**  
**LABOR ORGANIZATION OFFICER AND**  
**EMPLOYEE REPORT**

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



**READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.**

1. File Number: U- <b>7552</b>	2. Fiscal Year Covered From: <b>03 / 01 / 2004</b> Through: <b>12 / 31 / 2004</b>
3. Name and address of person filing.	
Name: <b>Vincent</b>	R: <b>Pesha</b>
P.O. Box, Bldg., Room No., if any	
Street: <b>15241 South Cottonwood Court</b>	
City: <b>Orland Park</b>	ZIP Code + 4: <b>60467-7346</b>
State: <b>Illinois</b>	ZIP Code + 4: <b>60603-3713</b>
4. Name, file number, and address of labor organization.	
Name: <b>BETU Local 1</b>	
Labor Organization File Number: <b>023715</b>	
P.O. Box, Building and Room Number, if any: Suite: <b>2500</b>	
Street: <b>111 East Wacker</b>	
City: <b>Chicago</b>	
State: <b>Illinois</b>	ZIP Code + 4: <b>60603-3713</b>
5. Position in labor organization: <b>Vice President</b>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests  
(except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any).	7.a. Nature of interest, transaction, or income.
Name: <b>Broadway In Chicago</b>	Tickets for miscellaneous opening night theatre performances at which members work.
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any: <b>Suite 700</b>	
Street: <b>22 West Monroe</b>	
City: <b>Chicago</b>	Amount: <b>9300</b>
State: <b>Illinois</b>	ZIP Code + 4: <b>60603-2500</b>

Signature

16. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed Vincent On **8/14/05** Date **8/14/05** Telephone Number **312-232-8700**

Name of Person Filing Vincent Pesha	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Chicago Sports & Novelty, Inc.	<input type="checkbox"/> a. Labor Organization
Trade Name, if any: [redacted]	<input type="checkbox"/> b. Trust
P.O. Box, Bldg., Room No., if any [redacted]	<input checked="" type="checkbox"/> c. Employer
Street 6801 West 66th Place	
City Chicago	
State Illinois ZIP Code + 4 60638-4895	

10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Metropolitan Pier & Exposition Authority	Have rented in order to sell novelties and sundries on a non-exclusive basis at McCormick Place.
Trade Name, if any: [redacted]	
P.O. Box, Bldg., Room No., if any [redacted]	
Street 1301 South Lake Shore Drive	
City Chicago	
State Illinois ZIP Code + 4 60616-1419	
	11.b. Approximate dollar value of such dealing. \$104,000
	12.a. Nature of interest held or income received.
	50% Owner of Chicago Sports & Novelty resulting in net income received from sales at McCormick Place.
	12.b. Amount. \$31,000

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name National Investment Services	One round of golf and dinner (August 2004).	
Trade Name, if any: [redacted]		
P.O. Box, Bldg., Room No., if any [redacted]		
Street 737 North Michigan Avenue		
City Chicago		
State Illinois ZIP Code + 4 60611-2615		
13.b. Is the Business an Employer <input checked="" type="checkbox"/> or Consultant <input type="checkbox"/> ?	14.b. Amount of payment.	\$150

Name of Person Filing Vincent Pesha

File Number U-

**Part B Continuation Page**

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

**8. Name and address of Business (including trade name, if any).**

Name Chicago Sports &amp; Novelty, Inc.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 6600 West 66th Place

City Chicago

State Illinois

ZIP Code + 4 60638

**10. If 9.b. or 9.c. is checked give trust or employer's name.**

Name Chicago National League Ball Club

Trade Name, if any: Chicago Cubs

P.O. Box, Bldg., Room No., if any

Street 1065 West Addison

City Chicago

State Illinois

ZIP Code + 4 60613-4803

**9. Business deals with:** a. Labor Organization b. Trust c. Employer**11.a. Nature of such dealing.**

Pays rent for storage portion of a garage April - September owned by Employer

**11.b. Approximate dollar value of such dealing.**

\$2,250

**12.a. Nature of interest held or income received.**

50% Owner of Chicago Sports &amp; Novelty

**t2.b. Amount.**

\$0

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<b>8. Name and address of Business (including trade name, if any).</b> Name <b>Chicago Sports &amp; Novelty, Inc.</b> Trade Name, if any: <b>Illinois Sportservice, Inc.</b> P.O. Box, Bldg., Room No., if any: <b>6801 West 66th Place</b> Street <b>6801 West 66th Place</b> City <b>Chicago</b> State <b>Illinois</b> ZIP Code + 4 <b>60638-4808</b>	<b>9. Business deals with:</b> <input type="checkbox"/> a. Labor Organization <input type="checkbox"/> b. Trust <input checked="" type="checkbox"/> c. Employer
<b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b> Name <b>Illinois Sportservice, Inc.</b> Trade Name, if any: <b>Illinois Sportservice, Inc.</b> P.O. Box, Bldg., Room No., if any: <b>333 West 35th Street</b> Street <b>333 West 35th Street</b> City <b>Chicago</b> State <b>Illinois</b> ZIP Code + 4 <b>60616-2651</b>	<b>11.a. Nature of such dealing.</b> Pays licensing fee to employer in order to sell novelties on a non-exclusive basis at a location outside U.S. Cellular Field.
	<b>11.b. Approximate dollar value of such dealing.</b> <b>\$70,000</b> <b>12.a. Nature of interest held or income received.</b> 50% owner of Chicago Sports & Novelty resulting in net income received from sales at U.S. Cellular Field.
	<b>12.b. Amount.</b> <b>\$26,250</b>

## Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name **Bansley & Keiner**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any **Suite 200**

Street **8745 West Higgins Road**

City **Chicago**

State **Illinois**

ZIP Code + 4 **60621-2704**

14.a. Nature of payment.

**One round of golf and dinner**

13.b. Is the Business an Employer  or Consultant  ?

14.b. Amount of payment.

**\$125**

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name **Blue Cross Blue Shield**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street **300 East Randolph Street**

City **Chicago**

State **Illinois**

ZIP Code + 4 **60661-5034**

14.a. Nature of payment.

**Labor golf outing (August 2, 2004)**

13.b. Is the Business an Employer  or Consultant  ?

14.b. Amount of payment.

**\$224**

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name **Chicago Asset Management Company**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street **70 West Madison Street**

City **Chicago**

State **Illinois**

ZIP Code + 4 **60602-4252**

14.a. Nature of payment.

**One round of golf and lunch (July 30, 2004)**

13.b. Is the Business an Employer  or Consultant  ?

14.b. Amount of payment.

**\$125**

## Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Associated Third Party Administrators

Trade Name, if any: ATPA

P.O. Box, Bldg., Room No., if any

Street 1640 South Loop Road

City Alameda

State California

ZIP Code + 4 94502-7089

14.a. Nature of payment.

Four rounds of golf and lunch.

13.b. Is the Business an Employer  or Consultant  ?

14.b. Amount of payment.

\$600

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Associated Third Party Administrators

Trade Name, if any: ATPA

P.O. Box, Bldg., Room No., if any

Street 1640 South Loop Road

City Alameda

State California

ZIP Code + 4 94502-7089

14.a. Nature of payment.

4 lunches (\$25 each)

Each

13.b. Is the Business an Employer  or Consultant  ?

14.b. Amount of payment.

\$100

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Amalgamated Bank

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street One West Monroe Street

City Chicago

State Illinois

ZIP Code + 4 60603-5301

14.a. Nature of payment.

One round of golf and dinner (July 2004).

13.b. Is the Business an Employer  or Consultant  ?

14.b. Amount of payment.

\$325

**Part B Continuation Page**

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

**8. Name and address of Business (including trade name, if any).**Name **Chicago Sports & Novelty, Inc.**Trade Name, if any: P.O. Box, Bldg., Room No., if any Street **6801 West 65th Place**City **Chicago**State **Illinois**ZIP Code + 4 **60638-4805****9. Business deals with:** a. Labor Organization b. Trust c. Employer**10. If 9.b. or 9.c. is checked give trust or employer's name.**Name **RN 124/12W Company, L.L.C.**Trade Name, if any: **Westfield Shoppingtown North Ridge**P.O. Box, Bldg., Room No., if any **12th Floor**Street **11601 Wilshire Boulevard**City **Los Angeles**State **California**ZIP Code + 4 **90025-0509****11.a. Nature of such dealing.****Pays rent to owner Westfield for store used to sell licensed apparel at Westfield Shoppingtown North Ridge / Nordstrom Mall.****11.b. Approximate dollar value of such dealing.****\$178,000****12.a. Nature of interest held or income received.****50% Owner of Chicago Sports & Novelty resulting in net income received from sales at Westfield Shoppingtown North Ridge / Nordstrom Mall.****12.b. Amount.****\$77,500**

## Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Chicago Equity Partners

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 180 North LaSalle Street

City Chicago

State Illinois

ZIP Code + 4 60601-2501

14.a. Nature of payment.

Lunch

13.b. Is the Business an Employer  or Consultant  ?

14.b. Amount of payment.

\$40

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Macro Consulting Group, Inc.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 550 West Washington Boulevard

City Chicago

State Illinois

ZIP Code + 4 60661-2595

14.a. Nature of payment.

One round of golf and dinner (June 9, 2004)

13.b. Is the Business an Employer  or Consultant  ?

14.b. Amount of payment.

\$125

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Goldberg Weisman & Cairo

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street One East Wacker Drive

City Chicago

State Illinois

ZIP Code + 4 60601-1802

14.a. Nature of payment.

Golf and dinner (September 2004)

13.b. Is the Business an Employer  or Consultant  ?

14.b. Amount of payment.

\$125

**Part C Continuation Page**

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name **Blue Cross Blue Shield**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street **300 East Randolph Street**

City **Chicago**

State **Illinois**

ZIP Code + 4 **60601-5014**

13.b. Is the Business an Employer  or Consultant  ?

14.a. Nature of payment.

**St. Patrick's Day party.**

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name **Previant, Goldberg, Belman, Gratz, Miller &**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any **Suite 302**

Street **1555 North Rivercenter Drive**

City **Milwaukee**

State **Wisconsin**

ZIP Code + 4 **53232-3979**

13.b. Is the Business an Employer  or Consultant  ?

14.a. Nature of payment.

**Milwaukee Brewer's baseball game and dinner at the stadium.**

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer  or Consultant  ?

14.b. Amount of payment.